Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

"FEE ADDRESS" INDICATION FORM

Address to: Mail Stop M Correspondence Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
INSTRUCTIONS: Only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be specified when the patentee would like correspondence related to maintenance fees to be mailed to a different address than the correspondence address for the application. When to check the first box below: If the fee address for the patent and/or application number(s) you indicate is to be established with, or changed to, an existing Customer Number. When to check the second box below: If a Customer Number representing the fee address has to be established so it can then be associated with the patent and/or application number(s) you indicate. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) § 403.	
Please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:	
Customer Number: 22971	
OR	
Request for Customer Number (PTO/SB/125) attached hereto in the following listed application(s) for which the Issue Fee has been paid for patent(s).	
PATENT NUMBER (if known)	APPLICATION NUMBER
7,606,898	09/695,812
Completed by (check one):	71//
Applicant/Inventor	4
	'Signature
✓ Attorney or Agent of record 59090 (Reg. No.)	Jason F. Lindh
(Reg. No.)	Typed or printed name
Assignee of record of the entire interest. See 37 CFR 3.71	
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Requester's telephone number
Assignee recorded at Reel Frame	October 29, 2009
	Date
NOTE: Signatures of all the inventors or assignees of record of the entire inferest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below.	
* Total offorms are submitted.	
This collection of information is required by 37 CFR 1.363. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO	

to process) an application. Confidentially is governed by 38 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to stack 5 minutes to complete, including gathering, preparing, and submitting the completed application for mot but USPTO. Time will vary appending upon the midvalid case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Pattern Tadesmark Office, U.S. Department of Commerce, P.O. Box 4456, Alexanders, V.A. 2231-4469, D. NOT SEINZ, COMPLETED FORMS TO THIS ADDRESS Trademark Office, U.S. Department of Commerce, P.O. BOX 1900, Assuration, V.A. 2201-1-100 DO 1701-100-100 CONTROLLED STATES SEND TO: Mail Stop M Correspondence, Commissioner for Patients, P.O. Box 1450, Albachardia, VA 2213-11450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2 MS1 - 0547US